Checklist (to be tick marked, as applicable)

Checklist

**Manuscript Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_

**Authors**

* Author for correspondence, with e-mail address and institution address provided
* Number of contributors restricted as per the instructions
* Identity not revealed in paper except title page (e.g. name of the institute in material and methods, citing previous study as ‘our study’, names on figure labels, name of institute in photographs, etc.)

**Presentation and format**

* Double spacing
* Margins 2.5 cm from all four sides
* Title page contains all the desired information
* Running title provided (not more than 50 characters)
* Abstract page contains the full title of the manuscript
* Abstract provided (150 words for case reports)
* Key words provided (three or more)
* Headings in title case (not ALL CAPITALS, not underlined)
* References cited in superscript in the text with brackets
* References according to the journal’s instructions.

**Tables and figures**

* No repetition of data in tables/graphs and in text
* Actual numbers from which graphs drawn, provided
* Figures in separate files are necessary and of good quality (colour)
* Figure legends provided (not more than 40 words)
* Patients’ privacy maintained (if not, written permission enclosed)
* Credit note for borrowed figures/tables provided

Type of article: Case Report

Title of the article: **Title of the manuscript**

Title Page

Running title : Not more than 50 characters

Firstname Lastname 1, Firstname Lastname 2, Firstname Lastname 2,\*

Please provide the following information:

1. job title, department, name of institution, city and country where the institution is located, and email address.

2. job title, department, name of institution, city and country where the institution is located, and email address.

\* Corresponding Author:

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Title Page

If patients can be identified, including by themselves, written informed consent for publication must be obtained. If applicable, please state "Written informed consent has been obtained from the patient(s) to publish this paper."

**Institutional Review Board Statement (if present):** In this section, it is recommended to include the Institutional Review Board (IRB) Statement and approval number, if applicable to your study. If the study did not require ethical approval, this statement may be excluded. Please note that the Editorial Office may request additional information.

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* The datasets generated during and/or analyzed during the current study are available in the [NAME] repository, [PERSISTENT WEB LINK TO DATASETS]
* The datasets generated during and/or analyzed during the current study are not publicly available due [REASON WHY DATA ARE NOT PUBLIC] but are available from the corresponding author on reasonable request.
* The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.
* Data sharing not applicable to this article as no datasets were generated or analyzed during the current study.
* All data generated or analyzed during this study are included in this published article [and its supplementary information files].
* The data that support the findings of this study are available from [third party name] but restrictions apply to the availability of these data, which were used under license for the current study, and so are not publicly available. Data are however available from the authors upon reasonable request and with permission of [third party name].

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**Author Contributions (Optional):** For articles with multiple authors, a brief paragraph outlining each author's individual contributions is required. The following statements can be used as a guide: "Conceptualization, X.X. and Y.Y.; Methodology, X.X.; Software, X.X.; Validation, X.X., Y.Y., and Z.Z.; Formal Analysis, X.X.; Investigation, X.X.; Resources, X.X.; Data Curation, X.X.; Writing – Original Draft Preparation, X.X.; Writing – Review & Editing, X.X.; Visualization, X.X.; Supervision, X.X.; Project Administration, X.X.; Funding Acquisition, Y.Y. All authors have read and agreed to the final version of the manuscript." Please refer to the CRediT (Contributor Roles Taxonomy) for further explanation of each term. Authorship must be restricted to those who have made significant contributions to the research presented in the manuscript.

**Funding (if present):** You should include one of the following statements: "This research did not receive any external funding," or "This research was supported by NAME OF FUNDING AGENCY, grant number XXX," and "The article processing charge (APC) was funded by XXX." Please verify that the information provided is correct and use the correct spelling of funding agencies, which can be found at https://search.crossref.org/funding. Any mistakes may have an impact on your future funding opportunities.

**Acknowledgments (Optional):** This section is dedicated to acknowledging any form of support that is not covered in the author contribution or funding sections. This can include administrative and technical assistance, as well as in-kind donations such as materials used in experiments.

**Title of the article**

Manuscript

Abstract Page

**Abstract:**

A case report abstract is a concise summary of a case report, typically limited to **150** words or less. It should provide a brief overview of the patient's medical history, symptoms, diagnosis, treatment, and outcome. The abstract should be written in a clear and concise manner, using plain language and avoiding technical jargon. It should highlight the key findings and implications of the case report, emphasizing its relevance to clinical practice or research.

**Keywords**: keyword 1; keyword 2; keyword 3 keyword or more…(At least three keywords)

**Introduction**

The manuscript could be of up to **1,500** words (excl. Abstract and refs), **10** refs max. Please include why this case is unique. If it is rare, how rare, how many cases have been reported.

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Text

**Case History**

Case history should provide a concise summary of the patient's medical background, including relevant medical conditions, medications, and surgeries. It should also detail the patient's chief complaints, symptoms, and diagnostic tests leading up to the diagnosis.

Include the tables/charts at appropriate places in the text itself. Do not include images in the text. Mark the point of insertion of images (e.g. Figure 1) along with the legends. Send the images separately as png files (not larger than 100 kb each)

**Discussion**

Critical analysis of findings, causes, treatment options, prognosis, compare with literature, clear and concise language, provide recommendations.

**References**

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in superscript with square bracket after the punctuation marks. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. The commonly cited types of references are shown here, for other types of references such as newspaper items please refer to ICMJE Guidelines (http://www.icmje.org or http://www.nlm.nih.gov/bsd/uniform\_requirements.html).

Articles in Journals

* Standard journal article (for less than six authors): Parija S C, Ravinder PT, Shariff M. Detection of hydatid antigen in the fluid samples from hydatid cysts by co-agglutination. Trans R Soc Trop Med Hyg 1996; 90:255–6.
* Standard journal article (for more than six authors): List the first six contributors followed by et al. Roddy P, Goiri J, Flevaud L, Palma PP, Morote S, Lima N, et al. Field evaluation of a rapid immunochromatographic assay for detection of Trypanosoma cruzi infection by use of whole blood. J Clin Microbiol 2008;46:2022-7.
* Volume with supplement: Otranto D, Capelli G, Genchi C: Changing distribution patterns of canine vector borne diseases in Italy: leishmaniosis vs. dirofilariosis. Parasites & Vectors 2009;Suppl 1:S2.

Books and Other Monographs

* Personal author(s):

Parija SC. Textbook of Medical Parasitology. 3rd ed. All India Publishers and Distributors. 2008.

* Editor(s), compiler(s) as author:

Garcia LS, Filarial Nematodes In: Garcia LS (editor) Diagnostic Medical Parasitology ASM press Washington DC 2007: pp 319-356.

* Chapter in a book:

Nesheim M C. Ascariasis and human nutrition. In Ascariasis and its prevention and control, D. W. T. Crompton, M. C. Nesbemi, and Z. S. Pawlowski (eds.). Taylor and Francis, London, U.K.1989, pp. 87–100.

Electronic Sources as reference

Journal article on the Internet: Parija SC, Khairnar K. Detection of excretory Entamoeba histolytica DNA in the urine, and detection of E. histolytica DNA and lectin antigen in the liver abscess pus for the diagnosis of amoebic liver abscess BMC Microbiology 2007, 7:41.doi:10.1186/1471-2180-7-41. http://www.biomedcentral.com/1471-2180/7/41

**Figures, Tables and Figure Legends**

Patient facial images must have their eyes covered to show respect for privacy. Charts or tables that show clinical data or course of treatment should generally be limited to the past six months.

All figures and tables must be cited in the main text as "Figure 1", "Table 1", and so on. Additionally, please ensure that figure legends are included in the manuscript. Figures should be provided as separate high-quality image files, with a resolution of greater than 300 dpi or a pixel dimension of 1800 x 1600. Please avoid embedding figures within Word or PowerPoint files. Tables should be provided in an editable file format and should not be saved as image files.